

MIHS-HP Dental

Maricopa Integrated Health Systems Health Plans (MIHS-HP) offers Dental coverage under a variety of programs.

Maricopa Health Plan (MHP)

An AHCCCS funded plan administered by MIHS-HP. Routine dental services do not require authorization if dentally indicated and provided by a participating provider. Members may seek care at the Family Health Centers (FHCs) and from MIHS-HP's private practice network.

Children under the age of three (3) years must have a referral from their PCP. Adults must have a referral from their PCP as well. Members must contact MIHS-HP's Comprehensive Health Center (CHC) at 602-344-1150 to schedule an appointment with a dental specialist. Services being requested outside of the MIHS-HP dental network must be approved by MIHS-HP. Call 602-344-8480 to request out-of-network authorizations. Providers are encouraged to verify eligibility by contacting AHCCCS or MIHS-HP Member Services at 602-344-8760.

Kids Care

Kids Care is a plan funded by AHCCCS. Members must meet eligibility criteria as determined by AHCCCS. Please contact AHCCCS to determine member eligibility at 877-764 KIDS (5437) statewide or 602-417-KIDS (5437) in Phoenix or MIHS-HP Member Services at 602-344-8760.

Health Select

Health Select is a plan for Maricopa County employees and their dependents. Routine dental services do not require authorization if they are dentally indicated and are provided by a participating provider. Members may seek care at the MIHS-HP FHCs and from MIHS-HP's private practice network. Members must contact MIHS-HP's CHC at 602-344-1150 to schedule an appointment with a dental specialist. Services being requested outside of the MIHS-HP dental network must be approved by MIHS-HP. Call 602-344-8480 to request out-of-network authorizations. Providers are encouraged to verify eligibility by contacting AHCCCS at 602-417-7200 or MIHS-HP Member Services at 602-344-8760.

MSSP

MSSP members have a comprehensive dental package. There is a calendar year maximum of \$1200.00. Providers are encouraged to verify benefits and eligibility at 602-344- 8760.

MLTCS

Dental benefits are available to MLTC children and adults. Children from 0 to 20 years have EPSDT coverage. Eligible adults have limited benefits, which are primarily diagnostic and preventive in nature. Children under the age of three (3) years must have a referral from their PCP. Adults must have a referral from their PCP as well. Please verify benefits and eligibility at 602/344-8760.

MIHS-HP Dental cont.

Dental Appointments Standards

To ensure that MIHS-HP members receive the highest level of care in the MIHS-HP environment, the following accessibility standards must be incorporated when scheduling:

Emergency Appointments	Within twenty four(24) hours of referral
Urgent Care Appointments	Within three (3) days of referral
Routine Care Appointments	Within Forty five (45) days of referral

Appointment Waiting Times Standards

Waiting Time	<ul style="list-style-type: none"> • Thirty (30) minutes past appointment time • Time begins from the scheduled appointment time until the first contact with a provider in the exam/care area • If the first provider is not a dentist and the patient needs to see a dentist, then the maximum arrival time between providers is fifteen minutes • Total waiting time is forty five (45) minutes
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Claims filing requirements

MIHS- HP has changed its dental filing requirements. In accordance with the AHCCCS mandate that was effective 10/1/00, all dental claims must be filed on the ADA form. MIHS-HP has incorporated this change effective for all services whether the member is AHCCCS (MHP and MLTC) or non-AHCCCS (Health Select and MSSP). This is a change from our previous policy that did allow services to be billed on the HCFA 1500 form. The continued exception to this rule is the billing of Medicare Approved services for MSSP members.

MIHS-HP Dental cont.

EARLY PERIODIC and SCREENING DIAGNOSIS AND TREATMENT (EPSDT)

All MIHS-HP providers are expected to ensure that members receive the appropriate care at the prescribed intervals. The Dental Periodicity Schedule appears below:

DENTAL PERIODICITY SCHEDULE

	Months	Years																	
Procedures	Birth through 36 months	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20+ up to 21
Dental Referral	+	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

Referrals for routine dental visits should begin at age 3. Earlier initial dental evaluations may be appropriate for some children. Subsequent examinations as prescribed by dentist.

Key: X = To be completed
+ = To be completed if indicated

All MIHS-HP participating providers are expected to keep record of it's no shows and report them monthly to MIHS-HP. MIHS-HP will attempt to do outreach with this information. Please submit no show information to:

**EPSDT Coordinator
2502 E University
Suite B1
Phoenix AZ 85304**

Claims Submission

MIHS-HP processes clean claims within thirty (30) working days of receipt. A clean claim contains all the elements necessary to process the claim. Claims must be submitted no later than six (6) months from the date of service to be eligible for payment. Charges for professional fees must be submitted using a HCFA 1500 form. Please call claims Research at 602 344-8555 with questions regarding claims status.